PATENT APPLICATION FEE DETERMINATION RECORD— Effective October 1, 2003

Application or Docket Number

												·
		CLAIMS AS	S FILED - (Column			(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TC	OTAL CLAIMS		4				-	RATE	FEE	1	RATE	FEE
FC	DR		NUMBER F	FILED	NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			4 min	nus 20=	. 0	* 0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			(mir	nus 3 =	* Ø	·		X43=		OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM PF	RESENT	 				+145=		OR	+290=	
* If	the difference	in column 1 is	less than ze	less than zero, enter "0" in column 2				TOTAL		j t		770·ō
	C	LAIMS AS A (Column 1)	MENDED	MENDED - PART II (Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA	a service of the serv	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO NO	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	·
ME	Independent	*	Minus	***		=	-	X43=		OŖ	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		Ī	+145=		OR	+290=	
							L	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1) (Column 2) (Column 3)							 	l.a !	AUUH, FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	70.0484	-		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDEN	CLAIM	LAIM		+145=	<u> </u>	OR	+290=	
								TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	``
		(Column 1)	(Column 3)			٠.	•		,			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	1	*	Minus	###		=	I	X43=		OR	X86=	
٩	FIRST PRESE		+					· · · · ·				
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290= TOTAL	
** 11	If the "Highest Num	mn 1 is less than the mber Previously Pai mber Previously Pa	aid For" IN THIS	S SPACE is	s less than	n 20, enter "20."	j A	TOTAL ODIT. FEE		OR A	TOTAL ADDIT. FEE	•
444	the Highest Nun	mber Previously Pa	id For IN Trio d For (Total or	Independe	i less than	13, enter 3.	four	nd in the ann	ronriate box	in colu	ımn 1.	ļ